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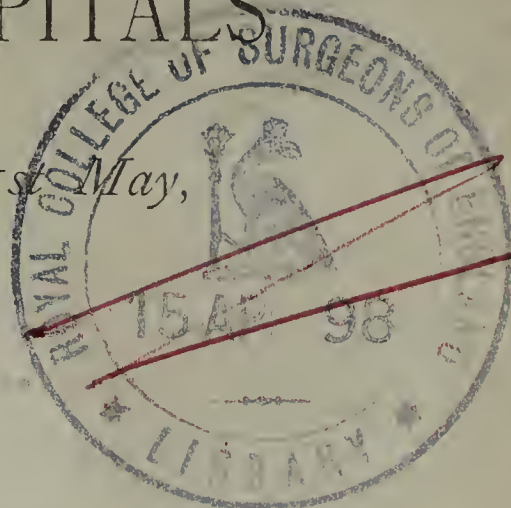
REPORT

OF THE

CITY OF GLASGOW FEVER AND SMALLPOX HOSPITALS

For the Year ending 31st May,

1896.



BY

ALEX. JOHNSTON, M.D., D.P.H.,

PHYSICIAN-SUPERINTENDENT.

WITH ADDED TABLES.

- A.—SUMMARY OF HOSPITAL STATISTICS SINCE 1865, AND OF COST OF TREATMENT SINCE 1883, BY THE SENIOR MEDICAL OFFICER OF HEALTH.
- B.—CASES OF SMALLPOX CLASSIFIED WITH REFERENCE TO VACCINATION, BY R. S. THOMSON, M.D., VISITING PHYSICIAN TO SMALLPOX HOSPITAL.
- C.—DIPHTHERIA WITH REFERENCE TO ANTI-TOXIN TREATMENT, BY ANDREW WATSON, M.B., ASSISTANT PHYSICIAN IN CHARGE OF DIPHTHERIA WARDS.

*Submitted to the Committee on Health, 12th October, 1896,
and ordered to be printed.*

GLASGOW:

PRINTED BY ROBERT ANDERSON, 22 ANN STREET.

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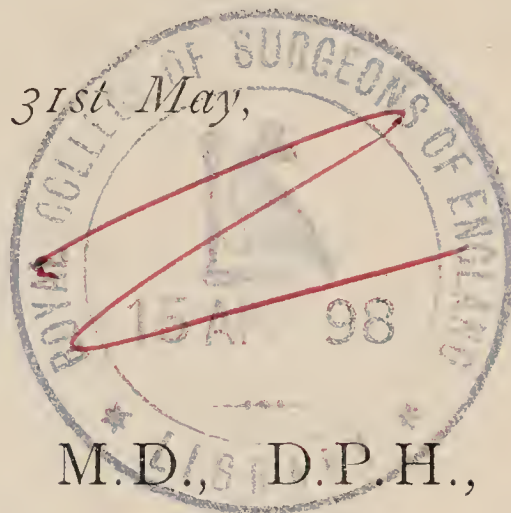
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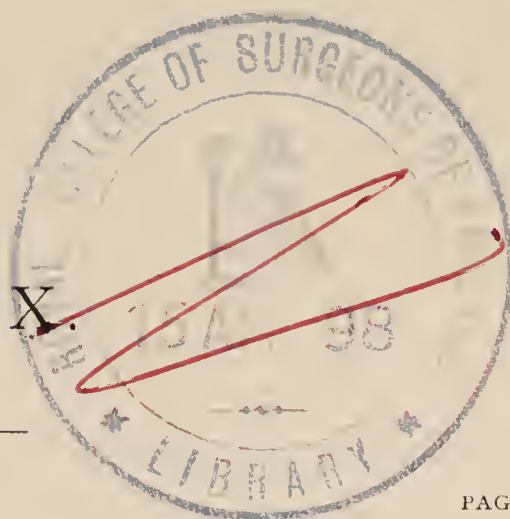
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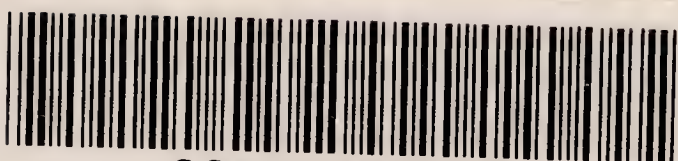
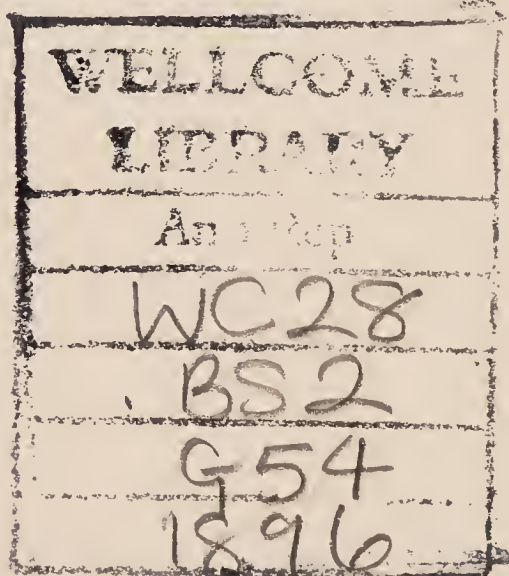
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TO THE CHAIRMAN AND MEMBERS
OF THE HEALTH COMMITTEE.

BELVIDERE HOSPITAL,
GLASGOW, *15th September, 1896.*

GENTLEMEN,

During the past year the number of cases admitted into the City of Glasgow Fever and Small-pox Hospitals was 4,606, a number below the average (5,334) for the previous three years, when the numbers were respectively :—

Year.								
1892-93,	-	-	-	-	-	-	-	= 6,172
1893-94,	-	-	-	-	-	-	-	= 4,850
1894-95,	-	-	-	-	-	-	-	= 4,981

The general mortality rate for last year was 9·6 per cent., practically the same as the average (9·3 per cent.) for the preceding three years—

Year.							Mortality.
1892-93,	-	-	-	-	-	-	8·7 per cent.
1893-94,	-	-	-	-	-	-	10·9 „
1894-95,	-	-	-	-	-	-	7·8 „

The 4,606 cases admitted were made up as follows :—

Classified Infectious Diseases, -	-	-	-	-	4,380
Unclassified „	-	-	-	-	21
Non-infectious Diseases, -	-	-	-	-	129
Nursing Mothers (admitted with Infants),	-				76
					<hr/> 4,606 <hr/>

Of these, males formed a proportion of 48·8 per cent., and females 51·1 per cent. of the total.

The mortality over all was 9·6 per cent.—that for males only being 10·7 per cent., and for females only 8·6 per cent.

Again and again these facts are observed—(1) that more females than males are admitted, and (2) the mortality among males exceeds that among females.

The classification of patients according to their ages shows a great preponderance of young children :—

Patients under 10 years of age,	-	=	67·1 per cent.
„ between 10 and 25 years,	-	=	24·4 „
„ over 25 years of age,	-	=	8·4 „

Subdividing those patients under 10 years of age, we find that in the two quinquennial periods the proportions are nearly equal :—

Patients under 5 years of age,	-	=	32·8 per cent.
„ between 5 and 10 years,	-	=	34·2 „

The daily average of patients under treatment, and the average stay in Hospital, show an increase, as follows :—

Year.		Daily Average.		Average Stay.
1892-93,	-	699 cases,	-	37·8 days.
1893-94,	-	624 „	-	41·2 „
1894-95,	-	644 „	-	42·9 „
1895-96,	-	651 „	-	46·5 „

These averages at first sight appear hardly to agree with a reduced number of admissions, but they are borne out by the nature and character of the cases treated. The exceptionally large number of cases of Enteric Fever—a disease requiring prolonged care and attention—accounts mainly for this fact.

While both Enteric and Typhus Fevers show an increase, a no less remarkable decrease is shown in connection with Scarlet Fever and Diphtheria.

Again, while the rates of mortality in Enteric Fever and Scarlet Fever bear an almost level uniformity with previous years, Typhus Fever and Diphtheria show remarkable

variations; that of the former being abnormally high, the latter exceptionally low:—

Year.	Enteric Fever.	Typhus Fever.
1892-93,	293 cases, 17·7 per cent.	37 cases, 16·2 per cent.
1893-94,	655 „ 17·9 „	57 „ 14·0 „
1894-95,	356 „ 19·3 „	46 „ 13·0 „
1895-96,	670 „ 17·1 „	60 „ 26·6 „
Year.	Scarlet Fever.	Diphtheria.
1892-93,	3,453 cases, 6·4 per cent.	93 cases, 38·7 per cent.
1893-94,	2,626 „ 6·6 „	181 „ 40·8 „
1894-95,	2,729 „ 4·9 „	241 „ 28·6 „
1895-96,	2,488 „ 5·5 „	169 „ 13·6 „

With an increase in the evil of overcrowding in the dirtiest quarters of the city an increase in the number of cases of Typhus Fever occurred, but, most remarkable of all, the increased severity of type was striking; the death-rate from the disease, as shown in the table above, being nearly double the average of the preceding years.

Diphtheria shows a decline in the number of cases, combined with a remarkable reduction in the mortality rate.

One naturally asks the question as to the bearing of the new method of treating this disease by the anti-toxin serum on the reduced mortality, although the answer is beset with difficulties.

It has been very apparent that the cases of Diphtheria admitted to Hospital were of an exceptionally mild nature, and such as under ordinary circumstances would have been marked, in all probability, by a reduced rate of mortality.

The reduction, however, is too great to be accounted for entirely by this view of the subject, and there can therefore be no doubt that the new remedy has played an important and beneficial part.

It stands, I think, proved that the anti-toxin serum is not what it was originally supposed to be, viz., a direct antidote to the poison of the disease.

This is shown in two ways—(1) the anti-toxin treatment cannot be successfully carried on unless associated with the general tonic and local treatment previously found

most useful ; and (2) complications and sequelæ, especially paralysis, are just as frequently met with as formerly.

Again, it has not been satisfactorily demonstrated that the Klebs-Löffler Bacillus is pathognomic :—

- (1) It is hardly ever found alone in diphtheritic membrane ;
- (2) It may even be absent ;
- (3) It may be present on surfaces and in secretions without giving rise to Diphtheria ;
- (4) It may be met with in scarlatinal and simple sore throats.

Still its presence in the great proportion of cases of Diphtheria, and its well-known physiological action, as demonstrated by inoculation of pure cultivations, satisfy the scientific mind that it plays an important part in producing the train of symptoms which we recognise as Diphtheria.

The discovery of the Klebs-Löffler Bacillus and the resulting serum treatment mark a distinct advance in our therapeutics, and although methods of diagnosis have not been materially improved, and results are far short of theoretical considerations, yet the nett gain is so considerable as to convince me that we are travelling the right road towards knowledge and truth.

For the relief of impending suffocation, Tracheotomy is an operation which has to be performed in cases of Diphtheria more often than in any other morbid condition. The risks of the operation itself cannot be held as trifling, and, from this point of view, Intubation has been frequently resorted to as a less heroic and, therefore, safer means of attaining the same end. Unfortunately, all cases cannot be relieved by the simpler expedient, and even some cases require Tracheotomy after getting temporary relief from Intubation.

Thirty-seven operations were performed during the year

for Asphyxia, occurring in 169 cases of Diphtheria admitted into Hospital, or in 22·4 per cent. of cases. Results :—

	Cases.	Died.	Mortality.
Intubation, - -	8	2	25·0 per cent.
Tracheotomy, - -	26	10	38·4 „
Intubation followed by Tracheotomy, -	3	1	33·3 „
	<u>37</u>	<u>13</u>	<u>35·1 per cent.</u>

When we consider that the Hospital practice is to delay operating as long as possible, the recoveries may almost be considered as lives saved, a result exceedingly satisfactory, and comparing favourably with the best previous records in the City Hospitals.

Double Infection.—This is one of the constant terrors to those having to administer a Fever Hospital. Cases on admission to Hospital may be suffering from more than one infectious disease at the same time, or they may be even incubating another than the one from which they are evidently suffering.

As far as my experience goes, I am glad to say that mistakes in the diagnosis of cases sent to Hospital are exceedingly rare. But it is even rarer for even the most experienced to be certain of recognising at first sight a combination of acute infectious disorders in any one patient, while it is impossible to diagnose a second disease still in the stage of incubation. The result of admitting such complicated cases to the ordinary wards is the development of many of our Indigenous cases.

The following table shows the nature and number of cases which developed another disease soon after admission to Hospital :—

Nature of Case on Admission.				Disease developing after Admission.	
Diphtheria,	2 cases,	-	-	Whooping-cough.	
Diphtheria,	1 „	-	-	Chickenpox.	
Scarlet Fever,	2 „	-	-	Measles.	
Measles,	2 „	-	-	Scarlet Fever.	
Measles,	4 „	-	-	Chickenpox.	

These accidental developments could not possibly have been guarded against, or the cross infection of the wards in which the patients were placed prevented.

The other class of cases which we have to deal with, and which is only a degree less troublesome than the foregoing includes those patients who, on admission, happen to be suffering from more than one acute infectious disease. The following list shows 36 such cases admitted suffering from—

Scarlet Fever and Measles,	-	-	-	3 cases.
„ Chickenpox,	-	-	-	4 „
„ Whooping-cough,	-	-	-	12 „
„ Erysipelas,	-	-	-	1 „
„ Diphtheria,	-	-	-	3 „
Measles and Whooping-cough,	-	-	-	9 „
Diphtheria and Whooping-cough,	-	-	-	3 „
Puerperal Fever and Erysipelas,	-	-	-	1 „
				<hr/>
				36 cases.

Of these 36 cases, 24 were, on admission, notified as suffering from both diseases, while the remaining 12 were found, on admission, to be suffering from another disease in addition to the one certified.

Considering that Scarlet Fever occupies the first place in our numbers, it will be seen that the diseases which cause annoying complications are chiefly Whooping-cough, Measles, and Chickenpox.

The foregoing remarks will serve to explain the following list of Indigenous cases, in number 66:—

Scarlet Fever,	-	-	-	-	-	-	= 19
Variola,	-	-	-	-	-	-	= 2
Varicella,	-	-	-	-	-	-	= 21
Measles,	-	-	-	-	-	-	= 13
Whooping-cough,	-	-	-	-	-	-	= 11
							<hr/>
							66

Taking a percentage on the admissions, we find that the Indigenous cases occurred during last year in the proportion of 1·4 per cent.

Infectious Diseases occurring among the Staff.—It is rarely that a year passes without serious illnesses being contracted by some members of the Hospitals' staff in the discharge of their duties. The ordinary sickness among the working staff (the daily average for last year being 325 persons) requires no special comment.

During the year, however, 22 cases of infectious disease occurred, as follows :—

Scarlet Fever,	-	-	-	-	-	-	7 cases.
Diphtheria,	-	-	-	-	-	-	1 „
Enteric Fever,	-	-	-	-	-	-	10 „
Typhus Fever,	-	-	-	-	-	-	2 „
Erysipelas,	-	-	-	-	-	-	2 „
							<hr/>
							22 cases.

Amongst these it is to be deeply regretted that two Nurses died from Enteric and Typhus Fevers respectively.

One Assistant Physician contracted Scarlet Fever and another Enteric Fever, from which diseases both recovered.

No case of Smallpox occurred among the staff of the Smallpox Hospital, for which the routine and systematic practice of vaccination and revaccination is responsible.

Statistical Tables in detail follow.

I remain, GENTLEMEN,

Your most obedient Servant,

ALEX. JOHNSTON.

1895-96.

STATISTICS.

TABLE I.

GENERAL STATEMENT.

REMAINING in Hospitals, 1st June, 1895,	-	521	
ADMITTED during 1895-96,	- - - -	4,606	
		<hr/>	5,127
DISMISSED—Cured, relieved, and died,	- - - -	-	4,520
			<hr/>
REMAINING in Hospitals, 31st May, 1896,	- -	-	607
			<hr/> <hr/>

Total Number of Deaths, - - 446

Nett Mortality, - - - 9·6

Of the Deaths, 68 occurred within 48 hours of admission to Hospital.

DAILY AVERAGES—

Patients, - - - - 651

Nurses and Servants, - - - 311

Officers, - - - - 14

Each patient has been under treatment on an average 46·5 days.

TABLE II.

MONTHLY DISTRIBUTION OF PRINCIPAL DISEASES
THROUGHOUT THE YEAR.

	Scarlet Fever.	Diphtheria.	Enteric Fever.	Typhus Fever.	Smallpox.	Chickenpox.	Measles.	Whooping-cough.	Erysipelas.	Unclassified.		Nursing Mothers.	TOTAL.	Daily Average Number of Patients in Hospital.
										Infectious.	Non-Infectious.			
1895.														
June, - -	164	11	25	1	13	1	58	18	5	1	11	9	317	506.7
July, - -	166	10	21	...	2	1	38	24	4	4	6	5	281	476.9
August, - -	261	18	104	...	1	...	58	20	5	1	10	10	488	557.2
September, -	319	21	125	...	...	5	27	32	1	2	14	8	554	783.9
October, - -	298	20	116	...	6	1	10	20	4	...	10	3	488	920.8
November, -	236	16	44	1	4	...	13	37	3	...	12	5	371	829.1
December, -	199	12	48	19	4	4	26	50	2	...	11	10	385	755.5
1896.														
January, - -	185	20	29	12	3	9	14	71	7	3	4	10	367	660.0
February, -	140	13	29	14	1	2	10	47	11	3	11	4	285	587.3
March, - -	182	10	44	10	1	2	16	56	10	2	11	5	349	560.6
April, - -	177	9	31	3	...	8	24	52	7	2	11	3	327	565.7
May, - -	161	9	54	...	1	4	96	34	10	3	18	4	394	605.1
										21	129			
Total, -	2,488	169	670	60	36	37	390	461	69	150		76	4,606	651.0

TABLE III.

NUMBER OF VARIOUS DISEASES TREATED.
(A) IN BELVIDERE FEVER HOSPITAL.

	Remaining in Hospital, 1st June, 1895.	Admitted.	Dismissed Cured or Died.	Remaining in Hospital, 31st May, 1896.
Scarlet Fever, - - -	84	1,101	1,043	142
Diphtheria, - - -	21	169	179	11
Enteric Fever, - - -	44	670	629	85
Typhus Fever, - - -	...	60	60	...
Smallpox, - - -	...	...	...	...
Chickenpox, - - -	...	...	...	...
Measles, - - -	43	390	343	90
Whooping-cough, - -	30	461	415	76
Erysipelas, - - -	6	69	68	7
Unclassified {	Infectious, -	1	21	1
	Non-infectious,	8	118	14
Nursing Mothers, - -	7	65	67	5
Total, - - -	244	3,130	2,943	431

(B) IN SMALLPOX HOSPITAL.

	Remaining in Hospital, 1st June, 1895.	Admitted.	Dismissed Cured or Died.	Remaining in Hospital, 31st May, 1896.
Smallpox, - - -	24	36	60	...
Chickenpox, - - -	1	37	33	5
Unclassified {	Infectious, -	...	...	...
	Non-infectious,	4	4	...
Nursing Mothers, - -	...	2	2	...
Total, - - -	25	79	99	5

(C) IN KENNEDY STREET HOSPITAL.

	Remaining in Hospital, 1st June, 1895.	Admitted.	Dismissed Cured or Died.	Remaining in Hospital, 31st May, 1896.
Scarlet Fever, - -	252	1,387	1,468	171
Un- classified { Infectious, -	...	...	...	...
Non-infectious,	...	1	1	...
Nursing Mothers, - -	...	9	9	...
Total, - -	252	1,397	1,478	171

(D) SUMMARY.

	Remaining in Hospital, 1st June, 1895.	Admitted.	Dismissed Cured or Died.	Remaining in Hospital, 31st May, 1896.
Scarlet Fever, - -	336	1,488	1,511	313
Diphtheria, - - -	21	169	179	11
Enteric Fever, - -	44	670	629	85
Typhus Fever, - -	...	60	60	...
Smallpox, - - -	24	36	60	...
Chickenpox, - - -	1	37	33	5
Measles, - - -	43	390	343	90
Whooping-cough, - -	30	461	415	76
Erysipelas, - - -	6	69	68	7
Un- classified { Infectious, -	1	21	21	1
Non-infectious,	8	129	123	14
Nursing Mothers, - -	7	76	78	5
Total, - -	521	4,606	4,520	607

TABLE IV.
SCARLET FEVER.—(A) BELVIDERE.

AGES OF PATIENTS.	MALES			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 year, -	2	...	...	10	2	20·0	12	2	16·6
1 and under 2,	12	2	16·6	9	2	22·2	21	4	19·0
2 ,, 3,	33	5	15·1	34	7	20·5	67	12	17·9
3 ,, 4,	55	4	7·2	55	7	12·7	110	11	10·0
4 ,, 5,	47	5	10·6	64	4	6·2	111	9	8·1
5 ,, 10,	212	10	4·7	216	7	3·2	428	17	3·9
10 ,, 15,	92	...	...	99	2	2·0	191	2	1·0
15 ,, 20,	34	...	...	36	...	...	70	...	...
20 ,, 25,	17	...	...	25	...	...	42	...	...
25 ,, 30,	10	...	...	12	1	8·3	22	1	4·5
30 ,, 35,	5	...	...	12	1	8·3	17	1	5·8
35 ,, 40,	3	1	33·3	3	...	...	6	1	16·6
40 ,, 45,	...	...	...	4	...	..	4	...	...
45 ,, 50,	...	...	...	...	...	...	...	...	...
50 ,, 55,	...	...	...	...	...	...	...	...	...
Total, - -	522	27	5·1	579	33	5·6	1,101	60	5·45

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Broncho-pneumonia, -	1	...	Phthisis Pulmonalis, -	1	1
Cellulitis, - - -	...	1	Purpura, - - -	1	...
Erysipelas, - - -	...	1	Rheumatism, - - -	1	...
Laryngitis, - - -	1	...	Sc. Anginosa, - - -	8	13
Measles, - - -	...	1	Sc. Maligna, - - -	...	5
Nephritis, - - -	2	1	Sc. Puerperal, - - -	...	2
Nephritis and Pneumonia,	1	...	Uræmia, - - -	1	...

(B) KENNEDY STREET.

AGES OF PATIENTS.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 year, -	9	4	44·4	6	1	16·6	15	5	33·3
1 and under 2,	32	9	28·1	18	5	27·7	50	14	28·0
2 „ 3,	39	7	17·9	32	4	12·5	71	11	15·4
3 „ 4,	77	6	7·7	73	2	2·7	150	8	5·3
4 „ 5,	58	5	8·6	66	3	4·5	124	8	6·4
5 „ 10,	269	5	1·8	317	17	5·3	586	22	3·7
10 „ 15,	86	1	1·1	137	3	2·1	223	4	1·7
15 „ 20,	26	...	...	47	1	2·1	73	1	1·3
20 „ 25,	26	1	3·8	18	...	...	44	1	2·2
25 „ 30,	12	2	16·6	16	1	6·2	28	3	10·7
30 „ 35,	7	...	...	4	1	25·0	11	1	9·0
35 „ 40,	2	...	...	6	...	...	8	...	...
40 „ 45,	1	...	...	...	...	...	1	...	...
45 „ 50,	...	...	...	1	...	...	1	...	...
50 „ 55,	...	...	...	2	...	...	2	...	...
Total, - -	644	40	6·2	743	38	5·1	1,387	78	5·6

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Abscess, - - -	1	...	Purpura Hæmorrhagica, -	...	1
Bronchitis, - - -	...	1	Rheumatism, - - -	...	1
Broncho-pneumonia, -	3	4	Sc. Anginosa, - - -	15	17
Burns of Face, - - -	1	...	Sc. Maligna, - - -	5	2
Cardiac Failure, - - -	...	1	Septichæmia, - - -	1	...
Diphtheria, - - -	1	...	Syncope, - - -	...	1
Nephritis, - - -	7	3	Tuberculosis, - - -	1	...
Pneumonia, - - -	3	1	Uræmia, - - -	...	1

(C) SUMMARY.

AGES OF PATIENTS.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 year, -	11	4	36·3	16	3	18·7	27	7	25·9
1 and under 2,	44	11	25·0	27	7	25·9	71	18	25·3
2 „ 3,	72	12	16·6	66	11	16·6	138	23	16·6
3 „ 4,	132	10	7·5	128	9	7·0	260	19	7·3
4 „ 5,	105	10	9·5	130	7	5·3	235	17	7·2
5 „ 10,	481	15	3·1	533	24	4·5	1,014	39	3·8
10 „ 15,	178	1	0·5	236	5	2·1	414	6	1·4
15 „ 20,	60	...	...	83	1	1·2	143	1	0·6
20 „ 25,	43	1	2·3	43	...	...	86	1	1·1
25 „ 30,	22	2	9·0	28	2	7·1	50	4	8·0
30 „ 35,	12	...	...	16	2	12·5	28	2	7·1
35 „ 40,	5	1	20·0	9	...	...	14	1	7·1
40 „ 45,	1	...	...	4	...	...	5	...	...
45 „ 50,	...	...	...	1	...	...	1	...	...
50 „ 55,	...	...	...	2	...	...	2	...	...
Total, - -	1,166	67	5·7	1,322	71	5·3	2,488	138	5·5

TABLE V.
DIPHTHERIA.

AGES OF PATIENTS.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Mortality per cent.
Under 1 year, - -	6	2	2	1	8	3	37·5
1 and under 2, - -	10	4	15	5	25	9	36·0
2 ,, 3, - -	10	1	11	...	21	1	4·7
3 ,, 4, - -	11	1	14	3	25	4	16·0
4 ,, 5, - -	7	...	10	1	17	1	5·8
5 ,, 10, - -	17	1	24	1	41	2	4·8
10 ,, 15, - -	6	...	7	1	13	1	7·6
15 ,, 20, - -	3	1	5	...	8	1	12·5
20 ,, 25, - -	2	...	2	...	4	...	...
25 ,, 30, - -	1	...	2	...	3	..	...
30 ,, 35, - -	...	...	1	...	1	...	...
35 ,, 40, - -	...	...	1	...	1	...	...
40 ,, 45, - -	...	...	1	...	1	...	...
45 ,, 50, - -	..	...	...	...	...	...	...
50 ,, 55, - -	...	...	1	1	1	1	...
Total, - -	73	10	96	13	169	23	13·6
Mortality, -	13·6 per cent.		13·5 per cent.				

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Apoplexy, - - -	...	1	Paralysis, - - -	1	2
Bronchitis, - - -	1	...	Whooping-cough, -	...	1

TABLE VI.
ENTERIC FEVER.

AGES OF PATIENTS.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 5 years,	26	5	19·2	16	1	6·2	42	6	14·2
5 and under 10,	83	3	3·6	69	6	8·6	152	9	5·9
10 „ 15,	83	10	12·0	76	8	10·5	159	18	11·3
15 „ 20,	43	8	18·5	46	10	21·7	89	18	20·2
20 „ 25,	52	15	28·8	22	4	18·1	74	19	25·6
25 „ 30,	36	14	38·8	27	5	18·5	63	19	30·1
30 „ 35,	23	3	13·0	21	6	28·5	44	9	20·4
35 „ 40,	18	8	44·4	11	2	18·1	29	10	34·4
40 „ 45,	6	4	66·6	3	...	...	9	4	44·4
45 „ 50,	4	1	25·0	...	...	...	4	1	25·0
50 „ 55,	1	...	...	...	...	...	1	...	...
55 „ 60,	...	...	...	2	2	...	2	2	...
60 and over, -	1	...	...	1	...	...	2	...	...
Total, -	376	71	18·8	294	44	14·9	670	115	17·1

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Abortion, - - -	...	1	Hyperpyrexia, - - -	...	1
Apoplexy, - - -	1	...	Myelitis, - - -	1	...
Bronchitis, - - -	2	1	Peritonitis, - - -	5	4
Broncho-pneumonia, -	...	1	Phthisis Pulmonalis, -	...	1
Cancer, - - -	...	1	Pneumonia, - - -	5	3
Hæmorrhage, - -	1	1	Tubercular Meningitis,	...	1

TABLE VII.
TYPHUS FEVER.

AGES OF PATIENTS					MALES.		FEMALES.		TOTAL.	
					Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 years,	-	-	-	-	...	...	2	...	2	...
5 and under 10,	-	-	-	-	6	...	3	...	9	...
10	„	15,	-	-	...	...	4	1	4	1
15	„	20,	-	-	10	1	4	1	14	2
20	„	25,	-	-	...	...	3	...	3	...
25	„	30,	-	-	4	2	5	2	9	4
30	„	35,	-	-	6	3	2	1	8	4
35	„	40,	-	-	2	1	...	...	2	1
40	„	45,	-	-	4	2	...	...	4	2
45	„	50,	-	-	2	1	...	...	2	1
50	„	55,	-	-	1	1	...	...	1	1
55	„	60,	-	-	1	...	1	...	2	...
Total,	-	-	-	-	36	11	24	5	60	16
Mortality,	-	-	-	-	30·5 per cent.		20·8 per cent.		26·6 per cent.	

TABLE VIII.
MEASLES.

AGES OF PATIENTS.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Mortality per cent.
Under 1 year, - -	13	4	13	3	26	7	26·9
1 and under 2, - -	17	3	22	6	39	9	23·0
2 „ 3, - -	33	3	20	4	53	7	13·2
3 „ 4, - -	27	3	22	2	49	5	10·2
4 „ 5, - -	24	...	24	...	48	...	...
5 „ 10, - -	69	1	68	1	137	2	1·4
10 „ 15, - -	3	...	5	...	8	...	...
15 „ 20, - -	8	...	3	...	11	...	...
20 „ 25, - -	3	...	7	...	10	...	...
25 „ 30, - -	2	...	2	...	4	...	...
30 „ 35, - -	3	1	1	...	4	1	25·0
35 „ 40, - -	...	...	...	...	...	...	...
40 „ 45, - -	...	...	...	...	...	...	...
Over 45, - -	...	...	1	...	1	...	...
Total, - -	202	15	188	16	390	31	7·9
Mortality, -	7·4 per cent.		8·5 per cent.				

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Broncho-pneumonia, -	6	4	Meningitis, . - -	2	...
Cancrum Oris, - -	1	1	Pneumonia, - - -	1	1
Diarrhœa, - - -	...	1	Scarlet Fever and Pneu-		
Marasmus, - - -	...	2	monia, - - -	...	1

TABLE IX.
WHOOPING-COUGH.

AGES OF PATIENTS.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Mortality per cent.
Under 1 year, - -	31	6	26	7	57	13	22·8
1 and under 2, -	28	12	29	7	57	19	33·3
2 „ 3, -	29	9	31	7	60	16	26·6
3 „ 4, -	33	4	40	6	73	10	13·6
4 „ 5, -	21	1	46	7	67	8	11·9
5 „ 10, -	65	2	79	2	144	4	2·7
10 „ 15, -	...	...	2	...	2	...	...
Over 45, - - -	...	...	1	...	1	...	...
Total, - - -	207	34	254	36	461	70	15·1
Mortality, -	16·4 per cent.		14·1 per cent.				

COMPLICATIONS IN FATAL CASES.

	M.	F.		M.	F.
Bronchitis, - - -	...	1	Epistaxis, - - -	...	1
Broncho-pneumonia, -	15	15	General Tuberculosis, -	...	1
Broncho-pneumonia and			Marasmus, - - -	1	3
Convulsions, - - -	1	2	Meningitis, - - -	3	1
Convulsions, - - -	3	6	Phthisis Pulmonalis, -	4	1

TABLE X.
ERYSIPELAS.

AGES OF PATIENTS.					MALES.		FEMALES.		TOTAL.	
					Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 years,	-	-	-	-	2	...	...	...	2	...
5 and under 10,	-	-	-	-	1	...	1	...	2	...
10	„	15,	-	-	2	...	...	...	2	...
15	„	20,	-	-	3	...	...	...	3	...
20	„	25,	-	-	4	1	6	...	10	1
25	„	30,	-	-	4	1	7	1	11	2
30	„	35,	-	-	4	...	2	...	6	...
35	„	40,	-	-	4	2	7	...	11	2
40	„	45,	-	-	6	1	4	...	10	1
45	„	50,	-	-	1	...	1	...	2	...
50	„	55,	-	-	1	...	2	...	3	...
55	„	60,	-	-	1	...	...	...	1	...
60	„	65,	-	-	2	...	1	...	3	...
65	„	70,	-	-	2	1	1	...	3	1
Total,	-	-	-	-	37	6	32	1	69	7
Mortality,	-	-	-	-	16·2 per cent.		3·1 per cent.		10·1 per cent.	

TABLE XI.
SMALLPOX.—(A) VACCINATED.

AGES OF PATIENTS.				MALES.		FEMALES.		TOTAL.	
				Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 years,	-	-	-	...	...	...	...	...	...
5 and under 10,	-	-	-	...	...	...	...	...	...
10 „ 15,	-	-	-	...	...	...	...	...	...
15 „ 20,	-	-	-	3	...	3	...	6	...
20 „ 25,	-	-	-	5	...	...	...	5	...
25 „ 30,	-	-	-	1	...	...	...	1	...
30 „ 35,	-	-	-	6	...	4	...	10	...
35 „ 40,	-	-	-	1	1	...	...	1	1
40 „ 45,	-	-	-	2	...	1	...	3	...
45 „ 50,	-	-	-	1	...	...	...	1	...
50 „ 55,	-	-	-	...	...	...	...	...	...
55 „ 60,	-	-	-	...	...	1	...	1	...
Total,	-	-	-	19	1	9	...	28	1*
Mortality,	-	-	-	5·2 per cent.				3·5 per cent.	

* Confluent.

(B) UNVACCINATED.

AGES OF PATIENTS.				MALES.		FEMALES.		TOTAL.	
				Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 years,	-	-	-	...	...	...	...	...	...
5 and under 10,	-	-	-	2	...	...	...	2	...
10 „ 15,	-	-	-	1	...	...	...	1	...
15 „ 20,	-	-	-	...	...	...	...	...	...
20 „ 25,	-	-	-	...	...	1	...	1	...
25 „ 30,	-	-	-	...	...	1	1	1	1
30 „ 35,	-	-	-	1	1	1	...	2	1
Total,	-	-	-	4	1	3	1	7	2*
Mortality,	-	-	-	25 per cent.		33·3 per cent.		28·5 per cent.	

* Hæmorrhagic.

(C) VACCINATION DOUBTFUL.

AGES OF PATIENTS.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 years, - - -
5 and under 10, - - -
10 ,, 15, - - -
15 ,, 20, - - -
20 ,, 25, - - -
25 ,, 30, - - -
30 ,, 35, - - -
35 ,, 40, - - -	I	...	...	...	I	...

TABLE XII.

UNCLASSIFIED DISEASES.

(A) BELVIDERE FEVER HOSPITAL.

(I) INFECTIOUS.

	ADMITTED.		DIED.	
	Males.	Females	Males.	Females
Influenza, - - - - -	3	...	...	...
Parotitis, - - - - -	...	I	...	...
Puerperal Fever, - - - - -	...	16	...	9
Varicella, - - - - -	I	...	...	...
Total, - - - - -	4	17	...	9
	21		9	

(2) NON-INFECTIOUS.

	ADMITTED.		DIED.	
	Males.	Females	Males.	Females
Abortion, - - - - -	...	1	...	...
Abscess, - - - - -	2	1	2	...
Adenitis, - - - - -	...	1	...	...
Bronchitis, - - - - -	1	1	...	...
Broncho-pneumonia, - - - - -	4	3	3	...
Cellulitis, - - - - -	3	1	2	...
Colitis, - - - - -	1	...	...	...
Enteritis, - - - - -	2	2	...	1
Febricula, - - - - -	2	5	...	...
Fracture and Contusion, - - - - -	1	...	...	...
Gastritis, - - - - -	...	2	...	...
Infants (prematurely born), - - - - -	...	2	...	...
Lunacy, - - - - -	1	1	...	...
Malarial Fever, - - - - -	1	...	...	...
Marasmus, - - - - -	2	1	1	...
Meningitis, - - - - -	...	1	...	1
Necrosis, - - - - -	1	...	...	...
Nil, - - - - -	6	4	...	...
Otitis and Thrombosis, - - - - -	...	1	...	...
Peritonitis, - - - - -	...	1	...	1
Phlebitis, - - - - -	...	1	...	...
Phthisis Pulmonalis, - - - - -	3	1	2	1
Plumbism, - - - - -	1	...	...	...
Pleurisy, - - - - -	1	2	...	...
Pneumonia, - - - - -	20	10	4	5
Scabies, - - - - -	...	2	...	...
Septic Wound, - - - - -	4	1	...	...
Septichæmia, - - - - -	...	1	...	1
Syphilis, - - - - -	1	...	...	...
Tonsilitis, - - - - -	2	7	...	...
Tubercular Knee, - - - - -	1	...	1	...
Tubercular Meningitis, - - - - -	2	1	2	1
Tubercular Peritonitis, - - - - -	2	...	1	...
Tuberculosis, - - - - -	4	1	3	1
Urticaria, - - - - -	1	...	...	...
Total, - - - - -	69	55	21	12
Nursing Mothers, - - - - -	124		33	
			65	

(B) KENNEDY STREET HOSPITAL.

(1) INFECTIOUS, - - - - - Nil.

(2) NON-INFECTIOUS.

	ADMITTED.		DIED.	
	Males.	Females.	Males.	Females.
Gastritis, - - - - -	...	I	...	...
	...	I	...	...
	I		0	
Nursing Mothers, - - - - -			9	

(C) SMALLPOX HOSPITAL.

(1) INFECTIOUS, - - - - - Nil.

(2) NON-INFECTIOUS.

	ADMITTED.		DIED.	
	Males.	Females.	Males.	Females.
Lichen Papulosum, - - -	I	...	...	...
Syphilis, - - - - -	I	I	...	...
Blood-poisoning, - - -	I	...	I	...
	3	I	I	...
	4		I	
Nursing Mothers, - - - - -			2	

TABLE XIII.

CASES OF INFECTIOUS DISEASE OCCURRING IN HOSPITAL.

(A) BELVIDERE FEVER HOSPITAL.

	STAFF.		PATIENTS.	
	Males.	Females.	Males.	Females.
Scarlet Fever, - - - -	...	6	10	9
Diphtheria, - - - -	...	1	...	...
Enteric Fever, - - - -	2	8	...	...
Typhus Fever, - - - -	...	2	...	...
Smallpox, - - - -	...	...	2	...
Chickenpox, - - - -	...	...	4	3
Measles, - - - -	...	...	1	1
Whooping-cough, - - - -	...	...	2	3
Erysipelas, - - - -	...	2	...	...
	2	19	19	16
	21		35	

(B) KENNEDY STREET.

	STAFF.		PATIENTS.	
	Males.	Females.	Males.	Females.
Scarlet Fever, - - - -	1	...	...	...
Chickenpox, - - - -	...	...	10	4
Measles, - - - -	...	...	8	3
Whooping-cough, - - - -	...	...	2	4
	1	...	20	11
	1		31	

ADDED TABLES.

TABLE A. I.—CASES TREATED IN CITY OF GLASGOW FEVER HOSPITAL,
THE HOSPITAL, 26TH APRIL,

Year ending 30th April.	Typhus.		Enteric Fever.		Relapsing Fever.		Smallpox.		Scarlet Fever.		Measles.		Whooping- cough.	
	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.
1865-66	1,154	128	64	8	...	...	7	...	5	...	...	...	...	...
1866-67	384	48	17	4	...	...	34	3	21	4	1	...	...	...
„	Treated in Parliamentary Road while reserved for Cholera only.													
„	Treated in Greendyke Street Hospital.													
1867-68	795	72	55	9	...	...	14	1	35	8	3	...	...	...
1868-69	1,023	142	91	9	...	...	2	...	34	7	4	1	...	...
1869-70	2,023	278	77	5	19	1	1	...	12	2	2	...	...	...
1870-71	495	56	38	2	1,863	31	369	46	1	1	7	...	...	...
1871-72	7	...	2	...	42	1	614	105	31	6	22	1	...	...
1872-73	...	...	1	...	...	...	578	97	...	...	10	...	...	...
1873-74	...	...	...	...	...	...	1,475	262	7	...	16	...	...	...
1874-75	...	...	...	...	...	...	191	25	442	65	48	2	...	...
1875-76	...	...	...	...	...	...	16	2	419	49	130	2	...	...
1876-77	...	...	...	...	...	...	40	7	65	5	29	1	...	...
1877-78	...	...	...	...	...	...	80	9	...	...	2	...	...	...
Year ending 31st May.														
1890-91	...	...	...	...	...	...	...	...	...	...	91	13	33	9
1891-92	...	...	...	...	...	...	...	...	...	...	60	3	...	...
1892-93	...	...	...	...	...	...	...	...	902	49	31	2	6	...
1893-94	...	...	2	...	...	...	...	...	1,827	117	...	...	...	...
1894-95	...	...	...	...	...	...	...	...	1,640	79	...	...	...	...
1895-96	...	...	...	...	...	...	...	...	1,387	78	...	...	...	...
Total, ...	5,881	724	347	37	1,924	33	3,421	557	6,828	470	456	25	39	9

* Up to 1877-78 (inclusive), "Other Diseases" include

KENNEDY STREET, OFF PARLIAMENTARY ROAD, FROM THE OPENING OF 1865, TILL 31ST MAY, 1896.

Febricula.		Erysipelas.		Cholera.		Diarrhœa.		Chickenpox.		Other Infectious Diseases.*		Other Diseases.*		Nursing Mothers.*	Total.	
T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.		T.	D.
24	64	6	...	1,318	142
13	...	1	...	...	...	...	...	...	...	...	...	36	6	...	507	65
...	12	9	18	4	...	...	...	...	10	...	...	40	13
...	7	4	6	...	...	...	...	...	...	...	...	13	4
22	1	...	...	...	...	1	...	...	...	...	...	44	9	...	969	100
24	2	...	...	...	...	...	60	12	...	1,240	171
19	...	3	...	..	...	...	...	...	...	...	...	74	15	...	2,230	301
17	86	38	...	2,876	174
...	...	3	...	...	...	...	...	...	...	...	...	21	2	...	742	115
1	...	1	...	...	...	...	...	...	...	...	...	24	...	...	615	97
...	1	...	...	...	70	...	...	1,569	262
...	4	...	...	...	63	2	...	748	94
...	2	...	...	...	67	...	...	634	53
...	2	...	...	...	19	...	...	155	13
...	9	...	...	...	8	1	...	99	10
...	1	...	14	139	22
...	43	...	4	...	2	109	3
...	2	...	7	948	51
...	2	...	14	1,845	117
...	1	...	12	1,653	79
...	1	...	9	1,397	78
120	1	8	...	19	13	27	4	18	...	43	...	657	91	58	19,846	1,964

“ Other Infectious Diseases ” and “ Nursing Mothers. ”

**TABLE A. II.—CASES TREATED IN CITY OF GLASGOW FEVER HOSPITAL,
DECEMBER, 1870, TILL**

Year ending 30th April.	Typhus.		Relapsing Fever.		Enteric Fever.		Smallpox.		Scarlet Fever.		Measles.		Whooping- Cough.	
	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.
1870-71	207	26	1,199	32	3	1	10	...	1	...	...	...	...	...
1871-72	504	55	1,702	36	83	13	...	...	12	1	6	...	...	...
1872-73	297	33	76	1	181	20	...	...	53	6	15	...	4	2
1873-74	228	33	..	...	275	26	...	...	313	36	45	1	...	...
1874-75	457	51	...	...	342	24	3	...	721	125	39	...	...	...
1875-76	530	58	...	...	527	66	...	...	22	...	3	...	...	...
1876-77	350	50	...	...	299	36	...	...	146	16	52	4	...	...
1877-78	275	37	...	...	287	44	...	...	127	21	105	10	10	2
1878-79	238	44	...	...	375	51	...	...	353	40	250	8	66	11
1879-80	239	34	...	...	407	55	...	...	536	64	115	3	98	11
1880-81	251	41	...	...	802	102	...	...	880	100	244	21	53	5
1881-82	227	33	...	...	391	57	...	...	634	54	279	14	54	5
1882-83	211	25	..	...	425	62	...	...	665	92	334	31	134	18
1883-84	345	31	...	...	338	46	...	...	1,069	123	344	24	183	28
Year ending 31st May. 1884-85	111	14	...	...	541	76	...	...	1,163	156	721	65	237	59
1885-86	145	14	...	...	240	36	...	...	812	83	93	6	164	26
1886-87	87	17	...	...	204	32	...	...	1,266	156	504	42	177	39
1887-88	188	20	...	...	276	45	...	...	1,265	99	338	19	166	36
1888-89	81	12	...	...	293	41	...	...	1,113	82	893	88	327	71
1889-90	76	14	...	...	389	70	...	...	903	59	815	88	286	56
1890-91	112	12	...	...	388	59	...	...	1,868	111	514	53	292	59
1891-92	121	25	...	...	487	100	...	...	1,907	114	684	84	259	57
1892-93	37	6	...	...	293	52	...	...	2,550	172	1,098*	97	263	61
1893-94	57	8	...	...	653	117	...	...	799	58	394	34	400	64
1894-95	46	6	...	...	356	69	...	...	1,089	57	819	59	204	37
1895-96	60	16	...	..	670	115	...	...	1,101	60	390	31	461	70
Total, ...	5,480	715	2,977	69	9,525	1,415	13	...	21,368	1,885	9,094	782	3,838	717

* Up to 1885-86 (inclusive), "Other Diseases" includes

BELVIDERE, FROM THE OPENING OF THE HOSPITAL ON 25TH
31ST MAY, 1896.

Febricula.		Diphtheria.		Erysipelas.		Cholera.		Diarrhœa.		Other Infectious Diseases.*		Other Diseases.*		Nursing Mothers.*	Total.	
T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.		T.	D.
6	...	3	2	1	...	...	...	...	...	...	...	19	10	...	1,449	71
54	1	...	...	...	...	...	...	...	188	42	...	2,550	147
45	3	2	...	...	58	17	...	732	81
40	3	...	...	...	11	1	...	...	92	23	...	1,007	120
25	2	...	...	...	...	...	...	...	221	40	...	1,810	240
31	2	...	...	...	...	...	...	...	88	18	...	1,203	142
53	1	2	...	5	...	...	...	...	...	...	...	123	11	...	1,030	118
30	...	2	2	3	1	...	...	...	...	...	...	125	23	...	964	140
35	...	3	2	6	2	...	...	...	...	...	...	184	23	...	1,510	181
37	...	2	...	10	1	...	...	...	...	...	...	152	20	...	1,596	188
58	...	7	...	15	2	...	...	...	...	...	...	267	23	...	2,577	294
64	3	11	7	18	...	...	...	...	...	...	...	254	34	...	1,932	207
41	1	7	4	49	4	...	...	...	...	...	...	342	45	...	2,208	282
58	3	7	3	58	5	...	...	...	...	...	...	406	55	...	2,808	318
63	...	11	6	85	5	...	...	...	...	...	...	535	66	...	3,467	447
27	...	8	5	94	7	...	...	...	...	...	...	295	39	...	1,878	216
20	...	4	3	68	3	...	...	...	...	31	1	279	23	140	2,780	316
22	...	12	5	104	5	...	...	...	...	52	3	213	27	103	2,739	259
7	...	38	17	79	13	...	...	...	...	15	2	161	21	157	3,164	347
4	...	51	24	141	15	...	...	...	...	22	...	209	33	142	3,038	359
22	...	105	42	202	17	...	...	...	...	20	5	213	30	112	3,848	388
19	...	70	29	302	23	...	...	...	...	49	4	308	35	161	4,367	471
6	...	93	36	53	3	2	...	...	...	36	6	177	24	140	4,748	457
2	...	181	74	146	14	...	...	...	...	40	11	131	26	112	2,915	406
...	...	241	69	111	15	...	...	...	...	22	11	82	10	107	3,077	333
...	...	169	23	69	7	...	...	...	...	21	9	124	33	65	3,130	364
769	8	1,027	353	1,627	142	2	...	14	3	308	52	5,246	751	1,239	62,527	6,892

“Other Infectious Diseases” and “Nursing Mothers.”

TABLE A. III.—CASES TREATED IN CITY OF GLASGOW SMALLPOX HOSPITAL, BELVIDERE, FROM THE OPENING OF THE HOSPITAL, 6TH DECEMBER, 1877, TILL 31ST MAY, 1896.

Year ending 30th April	Smallpox.		Scarlet Fever.		Measles.		Whooping- cough.		Febricula.		Chicken- pox.		Other Diseases.*		Nursing Mothers.*	Total.	
	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.	T.	D.		T.	D.
1878-79	13	...	...	...	...	...	...	...	...	...	3	...	4	...	...	20	...
1879-80	1	...	...	...	...	...	...	...	...	...	9	...	1	...	...	11	...
1880-81	11	3	...	...	...	...	...	...	...	...	11	...	6	...	...	28	3
1881-82	6	...	...	...	...	...	...	...	...	...	8	..	4	...	...	18	...
1882-83	12	1	1	...	...	...	...	...	...	...	6	...	2	1	...	21	2
1883-84	139	14	...	...	...	...	...	...	...	...	20	...	10	...	...	169	14
Year ending 31st May.																	
1884-85	66	3	1	...	...	...	...	...	...	...	19	...	9	...	...	95	3
1885-86	56	7	...	...	...	...	...	...	...	...	12	...	4	...	...	72	7
1886-87	...	...	...	...	...	...	...	...	...	...	10	...	...	...	...	10	...
1887-88	2	...	...	...	...	...	...	...	...	...	16	...	3	...	...	21	...
1888-89	2	...	...	...	1	...	...	...	...	...	15	...	5	1	3	26	1
1889-90	4	...	...	...	1	...	...	..	...	...	28	...	3	..	2	38	...
1890-91	1	...	...	...	4	...	1	1	...	...	19	...	2	1	4	31	2
1891-92	10	...	1	...	4	...	1	...	...	...	31	1	2	...	4	53	1
1892-93	434	30	1	...	1	...	...	...	2	...	18	...	18	1	2	476	31
1893-94	54	5	...	...	4	...	...	...	...	...	23	1	6	1	3	90	7
1894-95	209	17	...	...	3	...	...	...	...	...	31	1	6	2	2	251	20
1895-96	36	2	...	...	...	...	...	...	...	...	37	...	4	1	2	79	3
Total,	1,056	82	4	...	18	...	2	1	2	...	316	3	89	8	22	1,509	94

* Up to 1885-86 (inclusive), "Nursing Mothers" are included under "Other Diseases."

TABLE B. I.—CITY OF GLASGOW FEVER AND SMALLPOX HOSPITALS.—
NUMBER, AVERAGE RESIDENCE, AND COST OF TREATMENT OF
PATIENTS FROM 1883-84 TO 1895-96.

Year.	PATIENTS.			Total Ordinary Expenditure.	Average Daily Cost per Patient.	Average Cost of Treatment per Patient.	Average Cost of Bed per Year.
	Total under Treatment.	Average Daily Number in Hospitals.	Average Residence in Days.				
				£ s. d.	£ s. d.	£ s. d.	£ s. d.
1883-84	3,200	338	41·7	15,772 0 0	0 2 6·6	5 6 4·0	46 10 9·0
1884-85	3,828	355	38·1	19,754 6 7	0 2 11·0	5 11 1·5	53 4 7·0
1885-86	2,154	215	40·3	15,550 6 6	0 3 11·5	7 19 6·2	72 4 9·5
1886-87	2,993	332	43·3	16,504 3 5	0 2 8·7	5 17 11·9	49 14 7·5
1887-88	3,056	327	42·5	17,768 17 10	0 2 11·6	6 6 1·0	54 5 9·6
1888-89	3,459	357	41·7	18,171 15 6	0 2 9·5	5 16 4·9	50 18 11·5
1889-90	3,582	361	36·8	17,899 7 3	0 2 8·6	4 19 11·7	49 11 7·0
1890-91	4,286	460	39·2	21,092 15 11	0 2 6·1	4 18 5·9	45 17 0·7
1891-92	4,850	491	37·1	26,808 9 7	0 2 11·8	5 10 8·2	54 11 10·8
1892-93	6,749	699	37·8	36,263 18 8	0 2 10 1	5 7 5·4	51 17 6·1
1893-94	5,528	624	41·2	34,551 14 3	0 3 0·5	6 5 2·6	55 9 3·5
1894-95	5,482	644	42·9	34,039 19 0	0 2 10·8	6 4 2·2	52 17 3·4
1895-96	5,127	651	46·5	34,892 12 8	0 2 11·1	6 16 1·5	53 11 5·6

N.B.—The above calculations of cost do not include Interest on Capital expended in erecting Hospitals.

TABLE B. II.—CITY OF GLASGOW FEVER AND SMALLPOX HOSPITALS.—
RESIDENCE, AND AVERAGE COST PER PATIENT

Year.	SCARLET FEVER.		ENTERIC FEVER.		WHOOPIING-COUGH.		TYPHUS.	
	Average Residence (Days).	Average Cost per Patient.	Average Residence (Days).	Average Cost per Patient.	Average Residence (Days).	Average Cost per Patient.	Average Residence (Days).	Average Cost per Patient.
		£ s. d.		£ s. d.		£ s. d.		£ s. d.
1883-84	51·7	6 11 10·0	44·4	5 13 2·6	58·9	7 10 2·3	35·8	4 11 3·5
1884-85	50·2	7 6 5·0	45·1	6 11 6·5	44·4	6 9 6·0	35·2	5 2 8·0
1885-86	54·7	10 16 6·2	46·6	9 4 5·5	36·2	7 3 3·5	31·5	6 4 8·2
1886-87	56·1	7 12 10·5	48·7	6 12 8·5	44·3	6 0 8·6	31·3	4 5 3·5
1887-88	55·2	8 3 9·1	50·3	7 9 2·7	42·1	6 4 10·7	33·2	4 18 5·9
1888-89	56·7	7 18 3·4	52·5	7 6 6·7	50·1	6 19 10·3	34·2	4 15 5·7
1889-90	54·4	7 7 9·4	50·2	6 16 4·5	53·0	7 3 11·8	34·9	4 14 9·7
1890-91	54·3	6 16 5·1	49·0	6 3 1·3	40·3	5 1 3·0	32·4	4 1 4·9
1891-92	53·7	8 0 2·5	49·3	7 7 0·9	43·8	6 10 10·0	31·3	4 13 4·5
1892-93	50·6	7 3 10·0	49·1	6 19 6·8	42·6	6 1 1·1	32·8	4 13 2·8
1893-94	52·7	8 0 2·0	52·5	7 19 6·7	51·0	7 15 0·0	34·8	5 5 9·2
1894-95	57·4	8 6 3·2	51·8	7 10 0·6	61·0	8 16 8·4	34·8	5 0 9·6
1895-96	57·7	8 8 11·0	57·2	8 7 5·4	54·1	7 18 4·5	33·1	4 16 10·8

* Includes Erysipelas, Diphtheria, Chickenpox, and Puerperal Fever ;

† Includes Nursing Mothers, besides

N.B.—The above calculations do not include Interest

STATEMENT SHOWING PATIENTS CLASSIFIED AS TO DISEASE, AVERAGE
FOR EACH YEAR FROM 1883-84 TO 1895-96.

MEASLES.		OTHER INFECTIOUS DISEASES.*		SMALLPOX.		ALL OTHER DISEASES.†	
Average Resi- dence (Days).	Average Cost per Patient.	Average Resi- dence (Days).	Average Cost per Patient.	Average Resi- dence (Days).	Average Cost per Patient.	Average Resi- dence (Days).	Average Cost per Patient.
	£ s. d.		£ s. d.		£ s. d.		£ s. d.
34·8	4 8 8·9	...	...	27·5	3 10 1·5	26·4	3 7 3·8
30·6	4 9 3·0	...	...	19·2	2 16 0·0	22·0	3 4 2·0
26·2	5 3 8·5	24·7	4 17 9·2	24·1	4 15 4·7	21·8	4 6 3·5
29·5	4 0 4·6	26·5	3 12 2·5	...	...	26·2	3 11 4·7
22·2	3 5 10·3	29·0	4 6 0·4	16·5	2 8 11·4	21·3	3 3 2·3
26·6	3 14 3·1	28·3	3 19 0·0	18·5	2 11 7·7	23·9	3 6 8·6
30·6	4 3 1·6	21·4	2 18 1·6	24·0	3 5 2·4	22·5	3 1 1·5
25·4	3 3 9·8	25·2	3 3 3·8	24·0	3 0 3·6	25·4	3 3 9·8
26·2	3 18 2·0	22·9	3 8 3·8	38·0	5 13 4·4	20·8	3 2 0·6
26·1	3 14 2·3	20·0	2 16 10·2	30·0	4 5 3·3	20·2	2 17 5·0
27·7	4 4 2·2	22·4	3 8 0·9	42·2	6 8 3·0	23·1	3 10 2·5
27·7	4 0 2·8	26·2	3 15 10·7	30·4	4 8 0·7	27·1	3 18 6·0
29·2	4 5 5·8	31·2	4 11 4·1	30·1	4 8 1·4	29·4	4 6 0·8

prior to 1885-86, these are included in "Other Diseases."

Persons sent in by mistaken Diagnosis.

on Capital expended in erecting Hospitals.

TABLE C. I.—CITY OF GLASGOW SMALLPOX HOSPITAL, BELVIDERE.—VACCINATED
CHARACTER AND DIMENSIONS

AGE- PERIODS.	AREA OF SCARS.	ONE SCAR.								Two			
		FOVEATED.				UNFOVEATED.				FOVEATED.			
		Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.
0—5	Under $\frac{1}{4}$ sq. in., ...	3	...	...	...	3	...	...	...	...	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	1	...	...	...	...	...	...	...	...	...	...	...
5—10	Under $\frac{1}{4}$ sq. in., ...	3	1	...	...	1	...	...	...	...	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	3	...	...	...	...	...	...	...	...	...	...	...
	Over $\frac{1}{2}$ sq. in., ...	3	...	...	...	...	...	...	...	...	...	...	...
10—15	Under $\frac{1}{4}$ sq. in., ...	3	...	...	...	1	...	...	...	...	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	10	...	...	...	...	...	...	...	8	...	...	...
	Over $\frac{1}{2}$ sq. in., ...	8	...	...	...	2	...	...	...	9	...	...	...
15—20	Under $\frac{1}{4}$ sq. in., ...	2	...	...	...	...	...	...	...	1	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	13	...	...	...	1	...	...	...	5	...	...	...
	Over $\frac{1}{2}$ sq. in., ...	22	...	...	...	5	...	...	...	38	...	...	...
20—30	Under $\frac{1}{4}$ sq. in., ...	5	3	...	3	5	1	...	2	1	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	23	1	...	1	7	3	...	2	24	1	...	...
	Over $\frac{1}{2}$ sq. in., ...	73	...	...	...	9	...	...	...	77	1	...	1
30—40	Under $\frac{1}{4}$ sq. in., ...	8	...	...	...	5	...	1	2	...	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	15	1	...	...	5	...	...	...	13	...	...	...
	Over $\frac{1}{2}$ sq. in., ...	16	...	...	...	7	2	...	2	26	1	...	...
40 and upwards,	Under $\frac{1}{4}$ sq. in., ...	2	...	...	...	4	2	...	2	1	...	...	...
	$\frac{1}{4}$ — $\frac{1}{2}$ sq. in., ...	9	3	...	2	3	...	...	...	2	...	...	...
	Over $\frac{1}{2}$ sq. in., ...	6	...	...	...	...	...	...	...	14	...	...	...
Total, -		228	9	...	6	58	8	1	10	219	3	...	1

In addition to the above, there were 6 Vaccinated Cases, in which the dimensions of scar were not

CASES TREATED FROM 1ST JUNE, 1892, TO 31ST MAY, 1896; CLASSIFIED AS TO AGE, OF SCAR; WITH RESULTS.

SCARS.				THREE SCARS.								FOUR OR MORE SCARS.							
UNFOVEATED.				FOVEATED.				UNFOVEATED.				FOVEATED.				UNFOVEATED.			
Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.	Discrete.	Confluent.	Hæmorrhagic.	Deaths.
I
I
...
...	I	...	...	...	...	...	...	...	...	...	...	...
...	I	...	...	...
...
...
...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
I	I	...	...	I	...	...	...	7	...	...	...	I	...	...	...
...	I	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
...	I	...	...	...	...	...	...	...
3	6	...	...	...	I	...	...	...	II	...	...	...	I	...	...	...
...	...	I	I	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2	I	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
9	...	I	I	12	...	...	...	2	...	...	...	8	...	...	...	I	...	...	...
3	...	I	...	...	...	...	...	I	...	...	...	...	...	...	...	...	...	...	...
4	3	...	...	...	...	I	...	I	...	...	...	...	I	...	...	...
12	I	I	I	3	...	I	...	I	...	...	...	3	...	...	...	...	...	...	...
2	I	...	I	...	...	...	...
2	I	...	...	...	...	...	...	...	...	...	...	...
I	I	...	...	I	...	...	...	...
4I	I	4	3	30	I	I	...	8	I	...	I	3I	I	...	2	5	...	...	...

recorded. The ages of these were—I under 5 years, 3 from 30 to 40 years, and 2 over 40 years.

TABLE C. II.—CITY OF GLASGOW SMALLPOX HOSPITAL, BELVIDERE.—
CASES TREATED FROM 1ST JUNE, 1892, TO 31ST MAY, 1896,
CLASSIFIED AS TO VACCINATION.

Age-Periods.	VACCINATED.		VACCINATION DOUBTFUL. (No Scar visible.)		UNVACCINATED.		TOTAL.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
0 to 5, ...	10	...	3	...	7	3	20	3
5 „ 10, ...	13	...	...	...	7	3	20	3
10 „ 15, ...	56	...	1	...	4	...	61	...
15 „ 20, ...	111	...	1	...	2	...	114	...
20 „ 30, ...	271	11	4	1	20	9	295	21
30 „ 40, ...	139	6	4	2	17	8	160	16
40 and upwards,	56	6	2	...	5	5	63	11
Total, ...	656	23	15	3	62	28	733	54

R. S. THOMSON, *Visiting Physician.*

STATEMENT OF CASES OF DIPHTHERIA TREATED IN BELVIDERE
FEVER HOSPITAL FROM JUNE 1, 1895, TO MAY 31, 1896.

169 cases were treated—73 males and 96 females—with 23 deaths, giving a mortality of 13·6 per cent.

Bacteriological examinations were made on all the throats on admission and before dismissal.

The treatment adopted generally consisted in the use of anti-diphtheritic serum; the frequent cleansing of the throat, in all

cases, by some simple antiseptic; and, in cases, when thought necessary, operative interference.

Of the 169 cases, 41 were mild faucial cases, which required nothing further than simple local throat treatment.

The remainder, 128 cases, received anti-diphtheritic serum, and included such cases as follows :—

- (1) Mild faucial cases, where the membrane was unduly persistent or tending to spread ;
- (2) Mild faucial cases, where there was an extensive deposit of membrane ;
- (3) Laryngeal cases, from simple croupy cough to cases showing extreme dyspnœa.
- (4) Toxæmic cases, with or without laryngeal implication.

The following table shows the different age-periods and percentage mortality in the cases treated by anti-toxin.

Age.	No. of Cases.	Deaths.	Mortality per cent.
Under 1 year, - - -	8	4	50·0
1 and under 2 years, -	22	9	40·9
2 „ 3 „ -	14	1	7·1
3 „ 4 „ -	20	3	15·0
4 „ 5 „ -	14	2	14·3
Total under 5 years,	78	19	24·4
5 and under 10 years, -	30	1	3·3
10 „ 20 „ -	12	2	16·6
20 „ 30 „ -	5	...	0·0
30 and upwards, - -	3	1	33·3
Total over 5 years, -	50	4	8·0
All Ages, - -	128	23	18·0

Of the 169 cases, 37 demanded operative interference.

Intubation was performed in 8 cases, with 2 deaths—25·0% mortality.

Tracheotomy	„	29	„	11	„	37·9%	„
Total,	-	37		13		35·1%	„

The following table shows at different age-periods the mortality following tracheotomy :—

Age.	No. of Cases.	Deaths.
Under 1 year, - - -	2	2
1 and under 2 years, -	9	7
2 „ 3 „ -	3	0
3 „ 4 „ -	3	0
4 „ 5 „ -	5	0
Total under 5 years,	22	9
5 and under 10 years, -	6	1
10 „ 20 „ -	1	1
Total, - - -	29	11

Of the 23 fatal cases—

2 died within 1 hour after admission.

1	„	2	„	„
3	„	12	„	„
2	„	24	„	„
3	„	48	„	„
4	„	1 week	„	„
<hr/>				
15				

Patients who survived the primary manifestations of their illness, but succumbed later to complications :—

1 died of apoplexy.

1 „ convulsions.

1 „ broncho-pneumonia.

5 „ paralysis and uncontrollable vomiting.

8

ANDREW WATSON, M.B.